## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

				or <u>rax</u>	(31	17-473-4083				
PASTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifical	correspondence includir ed below or directed off	or transing the P acrwise	mitting the ISSI stent, advance of in Block 1, by (i	H. FOF and PUBLIC rders and notification a) specifying a new co	ATI of n xxcs	ON FEE (if requitaintenance fees vipondence address	ired). To vill be a and/or	flocks 1 through 5 sh mailed to the current ( (b) indicating a separ	ould be completed where correspondence address as site "PEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for cny change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
32692	7590 10/20	/2010			IMAL				ONG AIN	
3M INNOVAT PO BOX 33427 ST. PAUL, MN		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.								
					36	essica L. L	eBosu	······································	(Depositor's come)	
						70160 (A.	***********	<i>7</i> 4.7	(Signature)	
					J)	anuary 20	, 203	<del></del>	(Date)	
APPLICATION NO. FILING DATE				FIRST NAMED INVENTOR ATTORNEY DOCKET N				ENEV DOCKST NO	CONFIRMATION NO.	
<b></b>					milioniminiminiminiminiminiminiminiminimini					
10/796,702 03/09/2004 Johann F. Petersen 58999US003 2885 TULE OF INVENTION: METHODS OF MANUFACTURING A STRETCHED MECHANICAL PASTENING WEB LAMINATE										
,		**********	*******************************	-	******	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
appen. Type	SMALL ENTITY	Certana Susan		FUBLICATION FUE D		PROV. PAID ISSUE FEE		FOTAL FEE(S) DUB	DATE DUE	
nonprovisional	NO	ХО		\$300		ŝ0		\$1810	01/20/2011	
EXAMINER			AT UNIT	CLASS-SUBCLASS	s					
WOLLSCHLAGER, JEFFREY MICHAEL 1742				264-171130	*******					
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Thee Address' indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered atteney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TOBE	PRINTED ON	i FHE PATENT (print o	e tvo	(c)	***************************************			
							ee is id	entified below, the do	cument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
3M INNOVATIVE PROPERTIES COMPANY ST. PAUL, MINNESOTA										
Please check the appropr	inte assigner category or	categori	es (will not be p	inted on the patent):	ü	Individual 🖾 Ci	orporati	on or other private gro	ip entity 🗓 Government	
44. The following fee(s) are submitted:  24. Issue Fee  25. Publication Fee (No small entity discount permitted)  26. Advance Order - # of Copies				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2723 (enclose an extra copy of this form).						
	s SMALL ENTITY state	is. See 3	7 CFR 1.27.					TEY status, See 37 CF		
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) w tes Pater	II not be accepte a and Trademark	d from anyone other the Office.	an B	ie applicant; a regi	istered a	ittorney or agent; or the	e assignee or other party in	
Authorized Signature	Kethler	1B.	Yes	8				2 <u>ð</u> , 2011		
Typed or printed nam	g Kathleen B. G				Registration >	Vo. 56	,676			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450. Alexandria. V	sation is required by 37 C tiality is governed by 35 d application form to the tons for reducing this bu 'irginia 22313-1450. DC	PR 1.31 U.S.C. USPTC den, sho NOTS	1. The information of the control of	on is required to obtain 1.14. This collection is depending upon the is c Chief Information O COMPLETED FORM	or r s est ndiv ffice S TC	otain a benefit by to imated to take 12 idual case. Any co r, U.S. Patent and THIS ADDRES!	he publ minutes mment Traden 8. SENI	ic which is to file (and to complete, including s on the amount of the tark Office, U.S. Depa of TO: Commissioner for	by the USPTO to process) geathering, preparing, and the you require to complete rement of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.